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07/16/2007

LISA A. HAILE PH.D. GRAY CARY WARE & FREIDENRICH LLP 4365 EXECTIVE DRIVE **SUITE 1100** SAN DIEGO, CA 92121-2133

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(Depositor's n	7 /	. 1/	Aldon Griffis		
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T)	00	U	2007	15,	October

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR			CONFIRMATION NO.					
10/001,938	10/31/2001		Salvatore Albani			8878					
TITLE OF INVENTION: IMMUNOMODULATORY PEPTIDES DERIVED FROM HEAT SHOCK PROTEINS AND USES THEREOF											
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	FEE TOTAL FEE(S) DU	E DATE DUE					
nonprovisional	YES	\$700	\$300	\$0	\$1000	10/16/2007					
EXAM	INER	ART UNIT	CLASS-SUBCLASS]							
SZPERKA, MICI	HAEL EDWARD	1644	424-185100								
1. Change of correspond CFR 1.363).	ence address or indicatio	n of "Fee Address" (37	2. For printing on the p	• •	1 DLA	Piper US LLP					
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			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
PTO/SB/47; Rev 03-0 Number is required.	ication (or "Fee Address 22 or more recent) attach	ned. Use of a Customer									
			THE PATENT (print or ty								
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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
Please check the appropriate assignee category or categories (will not be printed on the patent):											
4a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (Plea	ase first reapply as	ny previously paid issue fe	e shown above)					
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Publication Fee (No small entity discount permitted) Advance Order - # of Copies Ten (10)											
Advance Order -	# of Copies		☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 07-1896 (enclose an extra copy of this form)								
5. Change in Entity Sta											
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).											
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		Olan	10		ober 15, 2007						
Authorized Signature	1	L - IM	<u> </u>	Date							

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Typed or printed name

Lisa A. Haile, J.D., Ph.D.

Registration No. __

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